

STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses

for LOBBYISTS (RSA Chapter 15)

RECEIVED

JAN 3 0 2019

PLEASE PRINT

I. Name of Lobbyist(s):

(Print Name of lobbyist)

Paul A. Worsowicz; Ari B. Pollack; Lisa K. Shapiro, Ph.D.

NEW HAMPSHIRE DEPARTMENT OF STATE

| | GALLAGHER, CALLAHA | N & GARTRELL, P.C. | |
|------------------------|--|---|--------|
| | 214 North Main Street, C | • | |
| 603-228 | | | _ |
| (Teleph | none) (Fax) | (Email) | _ |
| | overs: (Choose one – file separate reports to an ansactions which are not attributable to an | for each client, OR you may file a separate report f ny one client.) | or |
| X All reportable t | ransactions occurring in the month prior to the | ne reporting date relative to the following client. | |
| | PILLSBURY REALTY | DEVELOPMENT | _ |
| | (Full Name of Client as it appears on the | Lobbyist Registration Form) | |
| | ransactions by the lobbyist (including the lob y particular client. | obyist's family), or the lobbying firm listed below which | ch are |
| IV. Date of Report: | April 25, 2018 | July 25, 2018 □ | |
| Reports cover: ac | ctivity from date of registration to 3/31/18 | activity from 4/1/18 to 6/30/18 | |
| | October 31, 2018 | January 30, 2019 🗵 | |
| | activity from 7/1/18 to 9/30/18 | activity from 10/1/18 to 12/31/18 | |
| | o fees received and no reportable transacticomplete just this form and submit it to the Se | ions made since the last report. ecretary of State's Office, State House, Room 204, | |
| VI. Check if addition | nal reports are attached: | | • |
| X If you have rec | eived fees or made expenditures, you must fi | le Addendum A – Fees and Expenses | |
| ` | | u must file Addendum B - Report of Honorariums or | |
| If you, your fire | m, or your family has made political contribu | tions, you must file Addendum C – Political Contrib | ution |
| Sworn Statement/Affi | | affirm that the foregoing information is true and compl | lata |
| to the best of my know | | Thirm that the foregoing information is true and compa | ELE |
| () 10 | | . 2.4 | |
| | // / | 1-24-19 | |
| (Signature of Lobby) | Morry | (Date) | |



STATE OF NEW HAMPSHIRE Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

| I. Name of Lobbyist(s) | Paul A. Worsowicz; Ari B. Pollack; Lisa K. Sh | apiro, Ph.D. | |
|---|--|---|---|
| II. Name of lobbyist's pa | nrtnership, firm or corporation, if any: | | |
| | GALLAGHER, CALLAHAN & GARTRE | LL, P.C. | |
| | (Name of partnership, firm or corporati | ion) | |
| III. Name of ClientI | PILLSBURY REALTY DEVELOPMENT | _ DateJanu | ary 30, 2019 |
| lobbying, including fees for | of all fees received from the client identified above or services such as public advocacy, government relating legislation, and related legal work. The gross is | ations, or public r | relations services, |
| a) Total of all fees receive | ed in this reporting period | a) \$ | 1,625.00 |
| | ed this calendar year, prior to this reporting period. total prior monthly reports for this calendar year.) | b) \$ | 20,337.50 |
| c) Total of all fees receive (Add lines a and b) | ed to date. | c) \$ | 21,962.50 |
| d) Indicate the amount of yet been paid. | any such fees that are due, but have not | d) \$ | 2,625.00 |
| fees. Separate reports are lobbyist(s)/firm that are us are to be reported in one reporting period for salar expenses where the expenses where the expenses where the expenses of a ceremonial statement of each individual covered by (a) (for examp given to the subject of lo legislative reception). Ex | tnerships, firms, or corporations are required to re- to be filed for expenditures made relative to each control to any one client a separate report may be of three categories of expenses: (a) the aggregaties, benefits, support staff, and office expenses; (a) diture was of \$25.00 or less (for example: meals pass, purchase of a pen with a value of less than \$10 to object given to a person being lobbied with a value and expenditure made during this reporting period of all expenses of a mean with a value of greater than \$25, but not great | filed for the lobbate total of all expensions to the aggregate our chased during that is given to the of \$25.00 or less f greater than \$25, purchase of a later than \$50, re | aditures are made by the byist(s)/firm. Expenses paid during the total of all individua a business lunch where the person being lobbied (s); and (c) an itemize 5.00 for any purpose no ceremonial object to be staurant expenses for |
| support staff, and office ex | ses for this reporting period for salaries, benefits, expenses, related directly or indirectly to lobbying. | a) \$ b) \$ | 3,500.00 |
| in a), of \$25 or less. | | c) \$ | .00_ |
| c) Total of all itemized ex | spenditures reported in detail in section VI. | _ | .00 |

Lobbyist Fees & Expenses, Addendum A – Page 2 Client: PILLSBURY REALTY DEVELOPMENT

| d) I otal expenses for this reporting period. | | |
|--|--------------------------|-----------|
| (Add lines a, b and c.) | d) \$ | 3,500.00 |
| e) Total of expenses paid this calendar year, prior to this reporting period. | | |
| (This should be the amount on line f of addendum A for last month's report.) | e) \$ | 18,775.00 |
| , | | |
| f) Total of all expenses year to date. | f) \$ | 22,275.00 |
| VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from lobbying period, including by whom paid or to whom charged. | fees during this | reporting |
| Paid to: | Am | ount |
| | \$ | |
| | s | |
| | \$ | |
| | <u> </u> | |
| | \$ | |
| | | + |
| Sworn Statement/Affirmation by Lobbyist | | |
| I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the | e foregoing in | formation |
| is true and complete to the best of my knowledge and belief. | | |
| Signature of lobbyist) | 1-24-19 | ` |
| (Signature of lobbyist) | <u>(-24-19</u> (Date) | |
| | | |
| Paul A. Worsowicz | | |
| (Print Name of Lobbyist) | | |

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums

| Sworn | Stater | nent/Aff | irma | tion l | by L | obbyist |
|--------|--------|----------|-------|--------|------|---------|
| Statem | ent of | Income | and l | Expe | nses | for: |

| Statement of Income | • | · | | |
|--|--|--|---|--|
| Name of Lobbying partnership, firm or corporation: GALLAGHER, CALLAHAN & GARTRELL, P.C. | | | | |
| Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): Pillsbury Realty Development | | | | |
| Date of Report (check | one): | | | |
| April 25, 2018 □ | July 25, 2018 🗆 | October 31, 2018 🗆 | January 30, 2019 🔀 | |
| | | Statement of Income and E tement (insert the number o | Expenses described above, and the of Addendum forms being | |
| 1 Addendum A(s). | | | | |
| 0 Addendum B(s). | | | | |
| 0 Addendum C(s). | | | | |
| • | n that the foregoing info my knowledge and beli | | and each Addendum is true and | |
| (Signature of Lobbyist | | | (Date) | |
| Ari B. Pollack (Print Name of lobby) | st) | | , | |

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

| Statement of Income and Expenses for: | | | | |
|---|--|--|--|--|
| Name of Lobbying partnership, firm or corporation: GALLAGHER, CALLAHAN & GARTRELL, P.C. | | | | |
| Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): Pillsbury Realty Development | | | | |
| Date of Report (check one): | | | | |
| April 25, 2018 ☐ July 25, 2018 ☐ October 31, 2018 ☐ January 30, 2019 🔀 | | | | |
| I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted): | | | | |
| 1 Addendum A(s). | | | | |
| 0 Addendum B(s). | | | | |
| 0 Addendum C(s). | | | | |
| I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief. | | | | |
| (Signature of Lobbyist) Lisa K. Shapiro, Ph.D. (Print Name of lobbyist) | | | | |